

AGREEMENT FORM FOR POLITICAL CANDIDATE ADVERTISEMENTS

(check applicable box)

☐ FEDERAL CANDIDATE

☒ STATE/LOCAL CANDIDATE

To Avail Themselves Of The Lowest Unit Charge During A Political Window, Federal Candidates Must Sign The Certification On Page 3

Station and Location: <u>KOLC</u>	Date: <u>11/15/19</u>
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I, Barbara Norton

being/on behalf of: John Bel Edwards Campaign

a legally qualified candidate of the Democrat

political party for the office of: Governor

in the Run off Election

election to be held on: 11/16/19

do hereby request station time as follows:

Broadcast Length	Time of Day, Rotation or Package	Days	Class	Times per Week	Number of Weeks

Attach proposed schedule with charges (if available):

I represent that the payment for the above described broadcast time has been furnished by:

and you are authorized to announce the time as paid for by such person or entity. I represent that this person or entity is either a legally qualified candidate or an authorized committee/organization of the legally qualified candidate.

The name of the treasurer of the candidate's authorized committee is:

This station has disclosed to me its political advertising policies, including: applicable classes and rates; and discount, promotional and other sales practices (not applicable to federal candidates).

THIS STATION DOES NOT DISCRIMINATE OR PERMIT DISCRIMINATION ON THE BASIS OF RACE OR ETHNICITY IN THE PLACEMENT OF ADVERTISING.

To Be Signed By Candidate or Authorized Committee

Date

Signature

To Be Signed By Station Representative

☐ Accepted

☐ Accepted in Part

☐ Rejected

Barbara Norton
Signature

BARBARA NORTON
Printed Name

Title

ORDER**Orders**

Order / Rev: 448274
 Alt Order #: _____
 Product Desc: JOHN BEL EDWARDS
 Estimate: _____
 Flight Dates: 11/16/19 - 11/16/19
 Original Date / Rev: 11/15/19 / 11/15/19
 Order Type: CONTROLLED

KOKA-AM

Primary AE: House Shreveport
 Sales Office: L-SHV
 Sales Region: Local

Agency

Name: Pol19/Barbara Norton
 Buying Contact: _____
 Billing Contact: _____
3821 Morrow Street
Shreveport, LA 71109

Billing Type: Cash
 Billing Calendar: Calendar
 Billing Cycle: EOM/EOC
 Agency Commission: 0%

Advertiser

Name: Pol19/Barbara Norton
 Demographic: HH
 Product Codes: Candidates
 Revenue Code 1: Direct Business
 Revenue Code 2: Spot
 Revenue Code 3: General Revenue

New Business Thru: _____
 Advertiser External ID: _____
 Agency External ID: _____
 Unit Code: General

Bill Plan

Start Date	End Date	# Spots	Gross Amount	Net Amount
11/01/19	11/16/19	34	\$310.00	\$310.00

Totals

Month	# Spots	Gross Amount	Net Amount	Rating
November 2019	34	\$310.00	\$310.00	0.00
Totals	34	\$310.00	\$310.00	0.00

Account Executives

Account Executive	Sales Office	Sales Region	Start Date / End Date	Order %
House Shreveport			Start Of Order - End Of Order	100%

Ln	Ch	Start	End	Inventory Code	Break	Start/End Time	Days	Len	Spots	Rate	Pri	Rtg	Type	Spots	Amount
N 1	KOKA	11/16/19	11/16/19	Mo-Su Full Rotation Mo-Su 5a-12m	CM	5:00 AM-10:00 AM (5:00 AM-10:00 AM)	-----+-	1:00	15	\$8.00	P-03	0.00	NM	15	\$120.00
		<u>Start Date</u>	<u>End Date</u>	<u>Weekdays</u>		<u>Spots/Week</u>				<u>Rate</u>		<u>Rating</u>			
Week:		11/11/19	11/17/19	-----+-		15				\$8.00		0.00			
N 2	KOKA	11/16/19	11/16/19	Sa-Su Midday Sa-Su 10a-3p	CM	10a-3p	-----+-	1:00	15	\$10.00	P-03	0.00	NM	15	\$150.00
		<u>Start Date</u>	<u>End Date</u>	<u>Weekdays</u>		<u>Spots/Week</u>				<u>Rate</u>		<u>Rating</u>			
Week:		11/11/19	11/17/19	-----+-		15				\$10.00		0.00			
N 3	KOKA	11/16/19	11/16/19	Sa-Su PM Sa-Su 3p-7p	CM	3:00 PM-4:30 PM (3:00 PM-4:30 PM)	-----4-	1:00	4	\$10.00	P-03	0.00	NM	4	\$40.00
		<u>Start Date</u>	<u>End Date</u>	<u>Weekdays</u>		<u>Spots/Week</u>				<u>Rate</u>		<u>Rating</u>			
Week:		11/11/19	11/17/19	-----4-		4				\$10.00		0.00			
													Totals	34	\$310.00